

DATE  
10/20/00

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | BT       | 70381  |         |
| O.I.P.E. CLASSIFIER       |          | 10     | 8/29    |
| FORMALITY REVIEW          | FF       | 901    | 9-29-00 |
| RESPONSE FORMALITY REVIEW |          |        |         |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | ✓     | ✓        | 11-6-03 |
| 2     | ✓     | ✓        | 5-17-04 |
| 3     | ✓     | ✓        |         |
| 4     | ✓     | ✓        |         |
| 5     | ✓     | ✓        |         |
| 6     | ✓     | ✓        |         |
| 7     | ✓     | ✓        |         |
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| 10    | ✓     | ✓        |         |
| 11    | ✓     | ✓        |         |
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| 14    | ✓     | ✓        |         |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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